# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)  Protecting Choice in California, a project of Planned Parenthoo	ed FEC IDENTIFICATION NUMBER ▼
Affiliates of California	C C00556860
Check if 24-hour report 48-hour report New report Amends rep	port filed on Mam / Dab / Yayayay
Full Name of Payee AMS Communications, Inc.	Date of Public Distribution/Dissemination
Mailing Address 500 Sansome Street, Suite 404	10 03 2014  Amount
City State Zip Code	10110.00
San Francisco CA 94111	Transaction ID : PDT.E.10  Date of Disbursement or Obligation
Purpose of Expenditure Mailer  Category/ Type  24I	E 10 03 / Y Y Y Y Y
Name of Federal Candidate Support	Office Sought:
Julia Brownley Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 91346.35	Disbursement For: Primary
Full Name of Payee AMS Communications, Inc.	Date of Public Distribution/Dissemination
	10 03 2014
Mailing Address 500 Sansome Street, Suite 404	Amount
City State Zip Code	5055.00
San Francisco CA 94111	Transaction ID : PDT.E.21  Date of Disbursement or Obligation
Purpose of Expenditure Mailer  Category/ Type  24/	A 10 03 / Y Y Y Y
Name of Federal Candidate  Support	Office Sought:
Jeff Gorell Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 91346.35	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	15165.00
	7 1 7 1 7
(b) SUBTOTAL of Unitemized Independent Expenditures	··· >
(c) TOTAL Independent Expenditures	···· <b>&gt;</b>
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Kathleen Cogan [Electronically Filed] Da	te 10 03 7 2014
Signature	

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California	FEC IDENTIFICATION NUMBER ▼  C C00556860
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee Planned Parenthood Affiliates of California  Mailing Address 555 Capitol Mall, Suite 510	Date of Public Distribution/Dissemination  M 10
City State Zip Code Sacramento CA 95814	600.00  Transaction ID : PDT.E.44  Date of Disbursement or Obligation
Purpose of Expenditure Supplies for Field Office; 10/1 - 10/18 (estimate)  Category/ Type  24E	10 01 / 2014
Name of Federal Candidate    X   Support   Office	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	ursement For: Primary
Full Name of Payee Planned Parenthood Affiliates of California  Mailing Address 555 Capitol Mall, Suite 510	Date of Public Distribution/Dissemination
City State Zip Code	Amount 600.00
Sacramento CA 95814  Purpose of Expenditure Supplies for Field Office; 10/1 - 10/18 (estimate)  Category/ Type 24A	Transaction ID : PDT.E.45  Date of Disbursement or Obligation  10 01 2014
Name of Fodoval Condidate	e Sought: House District: 26  President Senate State: CA
	ursement For: Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures	1200.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Kathleen Cogan  [Electronically Filed] Date  Signature	0 0 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Protecting Choice in California, a project of Planned Parenth	ood
Affiliates of California	C C00556860
Check if 24-hour report X 48-hour report New report Amends	report filed on MMM / DD / YYYYY
Full Name of Payee	Date of Public Distribution/Dissemination
Planned Parenthood Affiliates of California	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 555 Capitol Mall, Suite 510	Amount
City State Zip Code	1633.54
Sacramento CA 95814	Transaction ID : PDT.E.48  Date of Disbursement or Obligation
Purpose of Expenditure Staff Time & Travel Expenses; 10/1 - 10/18 (estimate)  Category/ Type	24A 10 01 7 2014
Name of Federal Candidate Suppo	ort Office Sought: X House District: 26
Jeff Gorell Oppos	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 91346.35	Disbursement For: Primary X General 2014 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Planned Parenthood Affiliates of California	10 01 / Y Y Y Y Y Y
Mailing Address 555 Capitol Mall, Suite 510	.0 0. 20.1
	Amount
City State Zip Code	1633.54
Sacramento CA 95814	Transaction ID : PDT.E.49 Date of Disbursement or Obligation
Purpose of Expenditure Stoff Time & Travel Expenses: 10/1, 10/18 (cotimete)  Category/	M M / D D / Y Y Y
Type	24E 01 2014
Name of Federal Candidate Suppo	ort Office Sought: X House District: 26
Julia Brownley Oppo	se President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 91346.35	Disbursement For:  Primary  General  2014  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3267.08
(b) SUBTOTAL of Unitemized Independent Expenditures	······· <b>&gt;</b>
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or ag party committee) any political party committee or its agent.	
Kathleen Cogan	M = M / D = D / Y = Y = Y
[Electronically Filed] Signature	Date 10 03 2014
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**PAGE** OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Protecting Choice in California, a project of Planned Parenthood C00556860 Affiliates of California Check if 24-hour report X 48-hour report X New report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination Planned Parenthood Affiliates of California 2014 10 01 Mailing Address 555 Capitol Mall, Suite 510 Amount State Zip Code 1242.74 City CA 95814 Transaction ID: PDT.E.50 Sacramento Date of Disbursement or Obligation Purpose of Expenditure Category/ Staff Time for Field Office; 10/1 - 10/18 (estimate) 24A 10 01 2014 Type Name of Federal Candidate 26 Support Office Sought: X House District: Jeff Gorell CA Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 91346.35 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Planned Parenthood Affiliates of California 2014 Mailing Address 555 Capitol Mall, Suite 510 Amount City State Zip Code 1242.74 CA Transaction ID: PDT.E.51 Sacramento 95814 Date of Disbursement or Obligation Purpose of Expenditure Category/ 24E Staff Time for Field Office; 10/1 - 10/18 (estimate) 2014 10 01 Type Name of Federal Candidate 26 **X** Support Office Sought: X House District: Julia Brownley CA Oppose President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 91346.35 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 2485.48 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Kathleen Cogan [Electronically Filed] 10 03 2014 Date Signature

Schedule E)		FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Protecting Choice in California, a project of Planned Parenthood		C C00556860
Affiliates of California		C 600330800
Sheck if 24-hour report X 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	Date	e of Public Distribution/Dissemination
Planned Parenthood Affiliates of California		10 01 2014
Mailing Address 555 Capitol Mall, Suite 510		10 01 2014
	Amo	ount
City State Zip	Code	11.88
Sacramento CA 958		nsaction ID : PDT.E.52
Purpose of Expenditure		e of Disbursement or Obligation
Online Voter Guide; 10/1 - 10/18 (estimate)	ategory/ Type 24A	10 01 7 2014
Name of Federal Candidate	Support Office Sou	ght: X House District: 26
Jeff Gorell	X Oppose Presi	ident Senate State: <u>CA</u>
Calendar Year-To-Date	Disburseme	ent For: Primary X General
Per Election for Office Sought 913	46.35	Other (specify) ▶
Full Name of Payee	Date	e of Public Distribution/Dissemination
Planned Parenthood Affiliates of California		10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 555 Capitol Mall, Suite 510		10 01 2014
, , , , , , , , , , , , , , , , , , ,	Ame	ount
City State Zip	Code	11.88
Sacramento CA 95		saction ID : PDT.E.53 e of Disbursement or Obligation
Purpose of Expenditure	ategory/	M M / D D / Y Y Y Y
Online Voter Guide; 10/1 - 10/18 (estimate)	Type 24E	10 01 2014
Name of Federal Candidate	Support Office Sou	ght: X House District: 26
Julia Brownley		ident Senate State: CA
Colondor Voor To Data	Disbursem	
Calendar Year-To-Date Per Election for Office Sought	91346.35	Other (specify)
		Cutor (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures		23.76
	, L	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures		
		75 75
(c) TOTAL Independent Expenditures		
		7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Kathleen Cogan [Electronicall	y Filed] Date 10	03 2014
Signature		

**PAGE** OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Protecting Choice in California, a project of Planned Parenthood C00556860 Affiliates of California X 48-hour report New report 24-hour report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination Verizon 01 2014 10 Mailing Address P.O. Box 920041 Amount State Zip Code 75.00 City TX 75392 Transaction ID: PDT.E.46 Dallas Date of Disbursement or Obligation Purpose of Expenditure Category/ Internet for Field Office; 10/1 - 10/18 (estimate) 24A 10 01 2014 Type Name of Federal Candidate X House 26 Office Sought: Support District: Jeff Gorell CA Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 91346.35 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Verizon 2014 Mailing Address P.O. Box 920041 Amount City State Zip Code 75.00 TX 75392 Transaction ID: PDT.E.47 Dallas Date of Disbursement or Obligation Purpose of Expenditure Category/ Internet for Field Office; 10/1 - 10/18 (estimate) 24E 2014 10 01 Type Name of Federal Candidate 26 **X** Support Office Sought: X House District: Julia Brownley CA Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 91346.35 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 150.00 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Kathleen Cogan [Electronically Filed] 10 03 2014 Date Signature

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California	FEC IDENTIFICATION NUMBER ▼  C C00556860
Check if 24-hour report X 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee Wagaman Strategies	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 886 Metal Lane	Amount
City State Zip Code	125.00
West Sacramento CA 95691	Transaction ID : PDT.E.55  Date of Disbursement or Obligation
Purpose of Expenditure Consulting for Field Program; 10/1 - 10/18 (estimate)  Category/ Type  24A	10 01 / 2014
Name of Federal Candidate Support Office	e Sought: X House District:26
Jeff Gorell Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought  Disbute 2014	ursement For: Primary X General  Other (specify) ▶
Full Name of Payee Wagaman Strategies	Date of Public Distribution/Dissemination
Mailing Address 886 Metal Lane	10 01 2014 Amount
City State Zip Code	125.00
West Sacramento CA 95691	Transaction ID : PDT.E.56 Date of Disbursement or Obligation
Purpose of Expenditure Consulting for Field Program; 10/1 - 10/18 (estimate)  Category/ Type  24E	10 01 2014
Name of Federal Candidate Support Office	e Sought: X House District: 26
Julia Brownley Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought  Disb 2014	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Kathleen Cogan  [Electronically Filed] Date	03 / 2014
- <del>J</del>	

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Protecting Choice in California, a project of Planned Parenthood Affiliates of California	C C00556860
7 timates of Samorria	
Check if 24-hour report 48-hour report New report Amends report filed	d on Man / Dab / Yayayay
Full Name of Payee  James Wisley	Date of Public Distribution/Dissemination
, and the second	10 01 2014
Mailing Address 1570 Prospect Avenue	Amount
City State Zip Code	93.75
Hermosa Beach CA 90254	Transaction ID : PDT.E.57 Date of Disbursement or Obligation
Purpose of Expenditure Consulting for Field Program; 10/1 - 10/18 (estimate)  Category/ Type  24A	10 01 / 2014
Name of Federal Candidate Support Office	e Sought: X House District: 26
Jeff Gorell Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought  Disbut	ursement For: Primary X General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
James Wisley	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1570 Prospect Avenue	Amount
City State Zip Code	93.75
Hermosa Beach CA 90254	Transaction ID : PDT.E.58  Date of Disbursement or Obligation
Purpose of Expenditure Consulting for Field Program; 10/1 - 10/18 (estimate)  Category/ Type  24E	10 01 2014
	e Sought: X House District: 26
Julia Brownley Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought  Disb 2014	ursement For: Primary X General  4 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	187.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	22728.82
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
	10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	